EXHIBIT D 2006 BUILDING STATUS REPORT

(RHS and Section 8 units are not exempt. Complete ONE form for EACH building designated low income housing credits.)

Project Name Building I.D. No. (BIN): TN City County					Total No. Rental Units in Building No. Low Income Units in 2005* *Total No. Low Income Units 12/31/06* Percent of Low Income Units 12/31/06* If not 100% low income, submit Exhibit C: Applicable Fraction Worksheet									Page		
												Title:				
												Telephone No.:				
					*If not 100% Id	ow income,	submit Exhi	bit C: Applicable	e Fraction Wor	ksheet						
	(NOTE: PLE	EASE READ	INSTRUCTIONS ON NEXT PAGE BE	FORE COMPL	ETING THIS	FORM. ALS	SO ATTACH API	PLICABLE UTI	LITY SCHE	DULE F	OR EACH BU	JILDING/PRO)JECT.		
	Number	Square	Move		Move	Move	2006	2006	2006	No. in		Utility	Resident	Special	Move	
Unit	of	Feet	in Dete	Resident Name (1)	in	in	Recert	Recert	Recert	House-		Allowance		Needs	out	
No.	Bedrms	of Unit	Date		Income	Rent	Date (2)	Income (2)	Rent (2)	Hold	(3)	(Monthly)	Rent (4)	Code (5)	Date	
															 	
															 	
						1										
															-	
						1										
						1										
(1) If this resident transferred from another unit in the building, add 'T-(and the former unit number) to name.					(3) Is the unit entirely occupied by students? Yes = Y						•	(5) Special needs population identifiers: F = RHS (FmHA) assisted				
	bullain	g, add 1-(and the fori	mer unit number) to name.		res = No = N							tion 8 assis			
	(2) If rece	tification i	s not due ir	n 2006, leave blank.									Iderly Resid			
-\files\!	h alfa maa al 2000	100Evk D ::	la.		(4) If the resident receives a Section 8 or RHS subsidy							DIS = Disabled Resident				
c:\files\lihc\forms\2006\06Exh-D.xls HO-0421 (Rev 12/05)					indicate the dollar amount the resident pays towards their monthly rent.							20/50 = Very Low Income Resident. M = Market Rate Resident				
- 0.2	,				aren monuny rent.							K= Hurricane Evacuee D-1				